PART B - FEE(S) TRANSMITTAL

	d this Tegrin, togeth	ner with applicable]	Mail Stop ISSUI Commissioner fo P.O. Box 1450 Alexandria, Virg 571)-273-2885	or Patents	450	j	/
INSTRUCTIONS: This appropriate. All integrations indicated unless correction maintenance fee notifications.	form should be used for orrespondence including the low or directed oth	or transmitting the ISSU g the Patent, advance or erwise in Block 1, by (a			-			_
•		ock I for any change of address)]	Goole) Transmittal Ti	his certificate ca al paper, such a	nnot be used fo s an assignmen	domestic mailings of the rany other accompanying tor formal drawing, mu	ıσ
SAWYER LAV P O BOX 51418 PALO ALTO, CA	A 94303	/2006		Ce hereby certify that t States Postal Service addressed to the Ma ransmitted to the US	ertificate of Mai his Fee(s) Trans with sufficient p il Stop ISSUE PTO (571) 273-2	ling or Transm mittal is being postage for first FEE address a 2885, on the da	deposited with the Unite class mail in an enveloubove, or being facsimate indicated below.	ed se le
12/28/2006 SDENBOB2 00	0000023 10816556			Shana Ha	ack		(Depositor's name	<u></u>
01 FC:1501 02 FC:1504	1400.00 300.00			5	15/ 4		(Signatur	긔
03 FC:8001	30.00		l	December	22, 2006	5	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY D	OCKET NO.	CONFIRMATION NO.	
10/816,556	04/01/2004		Thomas E. Dowdy		P1916C	:/526C	1243	_
TITLE OF INVENTION COMPUTER SYSTEM	N: TRANSPARENT	COMPATIBILITY ANI	O ADAPTATION TO	D DIFFERING FO	RMAT IMPLE	MENTATIONS	S IN A	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSI	UE FEE TOTA	L FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	01/03/2007	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS					
RAHMJOO, M	IANUCHER	2628	345-604000					
Address form PTO/SB	ondence address (or Cha /122) attached.	nge of Correspondence	(1) the names of u or agents OR, alter (2) the name of a s registered attorney	ingle firm (having as or agent) and the na- attorneys or agents. I	a member a mes of up to	2	Law Group LLP	_
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	r type)	بتريد ودو			
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIC		ified below, no assignee bletion of this form is NO	data will appear on the Ta substitute for filing (B) RESIDENCE: (C)	e patent. If an assignment. ITY and STATE OR	COUNTRY)	i below, the do	cument has been filed	or
APPLE COMPU	TER, INC.		Cuper	tino, CA				
Please check the appropri		categories (will not be pr	rinted on the patent):	Individual 🛣	Corporation or o	ther private gro	up entity Governme	nt
4a. The following fec(s) a Issue Fee Publication Fee (N) Advance Order - #	o small entity discount p		b. Payment of Fce(s): (A check is enclos Payment by credi The Director is he overpayment, to I	ed. t card. Form PTO-203	38 is attached.	l fee(s), any def	hown above) iciency, or credit any extra copy of this form)).
5. Change in Entity Stat	•			le control de CNA	ALL ENTITY -	S 27 CE	P 1 27(a)(2)	
NOTE: The Issue Fee and	SMALL ENTITY state	us. See 37 CFR 1.27. uired) will not be accente	b. Applicant is no					in
NOTE: The Issue Fee and interest as shown by the r	ecords of the United Sta	ites Patent and Trademark	Office.					_
Authorized Signature	Much	000	<i>[ii]</i>		2/22/2006		· · · · · · · · · · · · · · · · · · ·	
Typed or printed name		Sawyer, Jr.	·	_	No. <u>30,80</u>]			
This collection of informa an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bu	CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	on is required to obtain 1.14. This collection i depending upon the i te Chief Information O	or retain a benefit by s estimated to take 12 ndividual case. Any fficer, U.S. Patent an	the public which the pu	th is to file (and applete, including amount of tin fice, U.S. Depa	by the USPTO to proce g gathering, preparing, a ne you require to compl atment of Commerce, P	ss) no ete

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

Attorney Docket No. P1916USC1/526C

In re the application of: Thomas E. DOWDY

Confirmation No: 1243

Serial No: 10/816,556

Group Art Unit: 2628

》 병 Filed: **April 1, 2004**

Examiner: Rahmjoo, Manucher

Transparent Compatibility and Adaptation to Differing Format Implementations In A Computer System

ENGLOSUPES (** * ***											
ENCLOSURES (check all that apply)											
Ш	Amendment/Reply			Ш	Assignment and Recordation Cover Sheet			After Allowance Communication to Group			
	After Final			Part B-Issue Fee Transmittal			Notice of Appeal				
Information disclosure statement				Letter to Draftsman			Appeal Brief				
	Substitute Form 1449			Drawings			Status Letter				
		Reference Copies			Petition			Postcard			
	Extension of Time Request *			Fee Address Indication Form			Other Enclosure(s) (please identify below):				
	Express Abandonment			Terminal Disclaimer							
	Certified Copy of Priority Doc			Power of Attorney and Revocation of Prior Powers							
	Response to Incomplete Appln				Address	ange of Correspondence dress					
	Response to Missing Parts				*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the						
					Commissioner to extend the time for response for xxxxxx month(s), from to.						
		.D	Claima Damain	in a T	CLAIMS	Extra Cla		RATE	ree .		
	FOR Claims Remain			ng Highest # of Claims E Previously Paid For		aims	KAIE	FEE			
Total	Claims	· · · · · · · · · · · · · · · · · · ·	20		20 0			\$ 50.00	\$ 0.00		
Indep	Independent Claims		2	4		0		\$200.00	\$ 0.00		
	Total Fees \$ 0.00								\$ 0.00		
					METHOD OF PAYM	ENT					
					30.00 is enclosed for 0.00. Patent Copies \$3		fees.				
\vdash	Issue Fee \$1400.00; Publication Fee \$300.00; Patent Copies \$30.00 Charge \$ to Deposit Account No (Account Holder Name) for payment of fees.										
Ш											
Charge any additional fees or credit any overpayment to Deposit Account No. <u>02-2120</u> (Sawyer Law Group LLP)											
	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Attorr	ey Nar	me J	oseph A. Sawyer,	Jr., Re	g. No. 30,801						
Signature C ~ M & A											
Date December 22, 2006											
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 12/22/2006.											
	Typed or printed name Shana Haack										
Signa	Signature %										